

HISTORY FACILITY PROFILE

GENTIVA HEALTH SERVICES
1142 WEST 2320 SOUTH, SUITE A
SALT LAKE CITY UT 84119
STATE'S REGION CODE: 001

PROVIDER #: 467027
PHONE NUMBER: (801) 978-8188
PARTICIPATION DATE: 04/19/1984

TYPE ACTION: RECERTIFICATION
TYPE FACILITY: OFFICIAL HEALTH
TYPE OWNERSHIP: PROPRIETARY

COMPLIANCE STATUS: FACILITY MEETS REQUIREMENTS

CURRENT SURVEY REVISIT DATES -

PRIOR 3 SURVEY	PRIOR 2 SURVEY	PRIOR 1 SURVEY	CURRENT SURVEY	PLAN/DATE OF CORRECTION
12/1998	12/1999	12/2000	12/12/2001	

PROGRAM REQUIREMENTS

	X		STD	G0212-AGENCY RESPONSIBLE FOR AIDE MEETING COMPETENCY EVALUATION
		X	STD	G0214-PERFORMANCE REVIEW OF EACH AIDE AT LEAST EVERY 12 MONTHS
X		X	STD	G0229-SUPERVISORY VISITS IF SKILLED CARE NO LESS THAN ONCE EVER
		X	STD	G0230-SUPERVISORY VISITS IF NO SKILLED CARE NO LESS THAN ONCE E
X			STD	G0236-RECORD WITH PAST/CURRENT FINDINGS MAINTAINED FOR ALL PATI

TYPE OF DEFICIENCY	CURRENT SURVEY	PRIOR 1 SURVEY	PRIOR 2 SURVEY	PRIOR 3 SURVEY
CONDITION	0	0	0	0
STANDARD	0	3	1	2
REGIONAL OFFICE FLAG (INCLUDES COPS)	0	0	0	0
HEALTH TOTAL	0	3	1	2

STATUS OF DEFICIENT COPS
CURRENT SURVEY

	DEFICIENCY NOT CORRECTED	DEFICIENCY CORRECTED AFTER APPROVAL	REPEAT COP DEFICIENCY
COP	0	0	0

COMPLAINT SURVEY INFORMATION

SURVEY DATE	STATUS
06/26/2000	UNSUBSTANTIATED
10/23/2000	SUBSTANTIATED
12/12/2001	UNSUBSTANTIATED
07/23/2002	UNSUBSTANTIATED

FMS SURVEY INFORMATION

* NO FMS SURVEYS FOR THIS FACILITY